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STATISTICS OF EPILEPSY; CALCULATED TO AFFORD DATA FOR
THE TREATMENT OF THAT DISEASE.

M. LEURET, principal physician of the Bicetre, has published in the "Archives Gen. de Med." for May last, an essay on the above-named disease, in which the following results are stated:—Of 106 patients of all ages, 14 experienced their first attack of epilepsy before 5 years of age; 5 between the ages of 5 and 10 years; 24 between 10 and 15; 18 between 15 and 20; 16 between 20 and 25; 8 between 25 and 30; 4 from 30 to 35; 3 from 35 to 40; 2 from 40 to 45; 5 from 45 to 50; and 1 only after 50 years of age. Adolescence would, therefore, seem to be the period which furnishes the greatest number of epileptic patients, and next to it the period of youth. As very young infants, however, are seldom sent to the Bicetre, this result cannot be pronounced on with certainty; and M. Leuret is of opinion that epilepsy is relatively much more frequent in children under 5 years than the above statement implies. Of the same 106 patients there were but 7 in whom the disease could be readily traced to exist in other members of their immediate families—of one, the father, a brother and two sisters; were epileptic; of a second, the father only; of the third, the mother and a sister; of the fourth, the mother and an uncle; of the fifth and sixth, the mother only; and of the seventh, an uncle. M. Leuret endeavored to ascertain, if the immediate relations of the patients had been subject to other affections of the brain or nervous system, but found this to be the case in no more than 8 instances, in 3 of which some of the patient's near relations had been affected with insanity; 2 cases had died of apoplexy; and the other instances were subjects of paralysis, or acute meningitis, or had committed suicide. From these data M. Leuret conceives the doctrine of the hereditary nature of epilepsy to be fairly open to doubt.

Workers in white-lead factories appeared to be peculiarly obnoxious to attacks of epilepsy. Among the fore-named 106 patients, the following peculiarities had been noticed:—30 had been addicted to drunkenness, 24 were of an irascible disposition, and a similar number given to onanism, and 15 to sexual indulgence; 17 were of a mild and amiable disposition, 16 of a timorous, and the same number of an obstinate charac-

ter ; 7 of a depraved tendency, and 3 gamblers. The disease had appeared in 10 of the patients subsequently to attacks of smallpox, in 8 after syphilis, in 5 after various fevers, in 4 after itch, &c.; but in saying this, it is not asserted that these diseases had any direct influence in the production of epilepsy. In the larger number of cases, terror would appear to have been the proximate cause of the access of the disease.

Of the 106 epileptics, 30 were accustomed to have fits every fortnight, 17 every month, 13 every week, 9 every three or four days, 4 almost every day, 2 daily, 1 every two months, 3 every three months, 1 every eight or nine months, 1 every year, 1 had had ten attacks in four years, and 24 were subject to them at variable epochs. It is seldom that, when the epoch of attack arrives, the patient has but a single fit; in most cases three, four, or more were found successively to follow. "I have seen (says M. Leuret), but only in the most severe cases, and which often speedily prove mortal, a patient the subject of *eighty fits in the space of twelve hours!* The patients recovered from one only to fall into another, and neither had intervals of sleep or of consciousness."

Of 33 patients 17 experienced this; the disease went on increasing in intensity; in 16 this progressively diminished. Of 101 cases, in 35 the attacks came on principally in the night; in 29, indifferently in the night and day; in 12, in the day time; in 8, during the day alone; in 8, in the night alone; in 3 principally, in other 3 always, in the morning; and in the evening only, or in the morning and evening only, in 3 others. Night appears, therefore, to be eminently the period most favorable to epileptic attacks. M. Leuret conceived that this might be partially owing to the horizontal posture at that period, and he accordingly recommended wakesfulness and exercise to the patients at the hour when they were liable to the access; some, though not all, found this advice available in warding off the fits. As an instance in favor of the influence of the horizontal posture in the production of epileptic attacks, the case is cited of a youth who had been liable to night fits, but had been observed never to be the subject of these when he travelled in a vehicle at night, being then obliged to sleep in a sitting attitude.

The number of fits in the year varied in M. Leuret's patients from 8 to 2149. The relative proportion of liability to attacks in different months of the year, as observed in 70 patients, is represented in the following table:—

Months of thirty days.	Average of Cases daily.	Months of thirty days.	Average of Cases daily.
January	15.6	July	15.4
February	17.1	August	12.0
March	14.6	September	14.4
April	13.5	October	12.9
May	14.2	November	15.2
June	13.3	December	14.1

The average of May or September will best represent the mean average of the year. As a general rule, attacks are most frequent in the winter and autumn, and least so in the spring and summer. As respects

the probable influence of lunar changes on the production of epileptic fits, M. Leuret concludes that the moon exerts no obvious influence on epileptics; or, if any conclusion be drawn, it may be that the new moon, contrary to the popular notion, exercises a salutary influence, fits being then rather less frequent than at other periods.

The electric state of the atmosphere is not without its influence on epileptics. Stormy weather predisposes to attacks, but the most powerful predisponent is certainly intemperance, and many patients have owed their recovery to an abandonment of previous intemperate habits. "Erotic impulses about the time of a fit are, in certain cases, altogether immoderate, and the patients, while destitute of consciousness, and only capable of instinctive actions, sometimes abandon themselves, without control, to the act of masturbation. Si, par des liens, si, à l'aide de la camisole, on leur tient les mains éloignées du corps, ils exécutent des mouvements du bassin, et tiennent en même temps des propos qui rendent manifestes, je ne dois pas dire les désirs, mais les besoins impérieux auxquels ils sont en proie. The deed is, in reality, at this time neither a passion or a vice—it is an organic action dependent on epilepsy. J'ai vu de jeunes garçons, sages, du moins en apparence, dociles, d'une réserve parfait, qui, dans l'intervalle d'attaques rapprochées, étaient pris d'un délire érotique qu'ils exprimaient et par leurs discours et par les mouvements de leur corps. On ne pouvait pas s'approcher d'eux, leur tâter le pouls, leur toucher le front, sans que ce simple contact ne fut reçu par eux comme une caresse."—*London Lancet.*

AMPUTATION ON ACCOUNT OF ENLARGEMENT OF THE KNEE-JOINT.

By G. Volney Dorsey, M.D., of Piqua, O.

ADAM BEAMER, the subject of the present operation, was brought to this place in June, 1840, from the county of Van Wert. His age was about twenty-two years. The history, given of his case at the time, was, that about one year previously, he was affected with severe pain in the right knee, of which no very obvious cause could be assigned, though he was inclined to attribute it to an injury received in leaping. He was treated by some physicians in that section of the State, by blistering, cupping, &c., but without any relief. About three months before I saw him, his knee began to swell, and increased very rapidly, so that, at the period of my examination, its circumference, immediately about the joint, was thirty-seven inches, declining gradually on each side, and extending about half way to the hip-joint above, and to the ankle below. Beyond these points, there seemed to be but little disease, though the limb was enlarged to almost double the size of its fellow. The swelling was hard, and not painful to the touch; the veins, ramifying on the external surface, immensely enlarged; the great weight and pressure had caused some ulceration on the inferior parts of the tumor, augmented probably by the heat of the weather, and by travelling many miles over very rough roads, on a bed imper-

fecly suspended in a small wagon. His constitutional symptoms were, extreme debility, hectic fever, cough and copious expectoration, diarrhoea, and emaciation to such an extent that the tumor and limb removed, would doubtless have weighed one third or more of his whole body. As the swelling was rapidly progressing, and the constitution sinking, it was determined at once to amputate, as the only possible means of saving life. I accordingly proceeded to operate, in the presence of all the physicians and a number of the citizens of the town. It being necessary to cut as high up as possible, from fear of disease of the bone, the tourniquet could not be used, but the artery was compressed in the groin by an able assistant. Contrary to the usual opinion in regard to the upper third of the thigh, I performed according to the flap method, plunging the knife directly through the thigh from above downward on the outside of the bone, and cutting out a flap of half the diameter of the stump; then entering and bringing out the knife at precisely the same points on the inside of the bone, another flap was made, the parts retracted and the bone sawed, all which was done in less than one minute. Two arteries and the femoral vein were secured, the flaps brought together by adhesive plaster and dressed with basilicon; less than a pint of blood was lost, which was fortunate for my debilitated patient. The femoral vein was unusually small; the medulla of the bone appeared slightly dark. No bad symptoms supervened, but on the contrary all the unfavorable constitutional symptoms disappeared at once, with the exception of the diarrhoea which was troublesome for a few days, and the patient declared he slept better the night succeeding the operation than he had done for months. In two weeks the wound was half healed: the last ligature came away on the 30th day.

This case is interesting from the immense size of the tumor, being, I believe, among the very largest that have ever been amputated with success, and also because it gives evidence of the great recuperative powers of the system, which often rallies when reduced to the lowest ebb, provided the cause of disease can be removed.

One word on the subject of the flap operation, now, I believe, fortunately for humanity, becoming tolerably general. I have used it in amputation in various situations above and below the knee, and on the arm, and always with the most satisfactory results. It is infinitely more speedy than the circular method, and consequently produces less suffering; but the great advantage is, that by any common care, all possibility of protrusion of the bone, with all its dreadful consequences, is avoided with perfect certainty.

This tumor, when examined after amputation, presented the appearance of a fungous growth, originating from the medulla of the lower third of the os femoris, and arising to the height of about twelve inches, carrying the flesh and muscles, which seemed tolerably sound, before it. The patella and the head of the tibia were enlarged and disposed to soften—all the ligaments of the joint much diseased and distended by the fluid which occupied its cavity, to the amount of at least a quart—no pus

was discernible—the fungous growth was of a yellow color, and hard gristly consistence, springing directly from the medulla, destroying the upper half of the circumference of the bone, and branching widely upwards and on both sides.

This patient recovered entirely from the operation, but died, as I have understood, about eighteen months afterwards from an attack of bilious fever.—*Western Lancet.*

OBSERVATIONS ON THE TREATMENT OF SPRAINS.

By J. V. Prather, M.D., of St. Louis.

SPRAINS are usually considered injuries of little gravity, and treated accordingly. In general, it is true, but not to the extent which is generally believed; for every observing surgeon knows that many grave diseases can be traced to these injuries, such as a permanent debility or lesion, which predisposes to a return of the same accident from very slight causes; scrofulous diseases, in persons of that peculiar temperament which is favorable to their generation; acute and chronic inflammation, suppuration, and even caries of the bones of the articulation. The liability of such serious consequences from sprains, one would suppose, ought to have engaged the attention of surgeons more than it has, but the little success which has attended their prescriptions in many cases, it would seem, has paralyzed their energies, and caused them to leave their treatment in most cases to old women and quacks. These facts have induced me to make a few observations on them, and particularly on their treatment.

A sprain, or strain, signifies a violent stretching or extending of the tendinous or ligamentous tissues of an articulation, with or without rupture of their fibres. It is asserted by some distinguished surgeons, that sprains cannot take place in the orbicular articulations, and are confined to the ginglymoid. This is a mistake; every articulation in the system is subject to them; for a violent abduction of the thigh and a strong movement of the arm backwards, when it is abducted and horizontal, will strain the ligaments of the coxo-femoral and the scapulo-humeral articulations, which we know by the usual signs. Symptoms—pain, usually intense, at the affected articulation, often accompanied with faintness; no deformity or manifest alteration in the natural relations of the articular surfaces; mobility of the parts immediately after the accident, followed with difficulty of motion; sudden tumefaction and generally ecchymoses of the surrounding surfaces.

The diagnosis is easy, if a proper attention and a moderate exercise of common sense is brought to bear, although sprains have been mistaken for luxations, and the efforts to reduce them have occasionally inflicted severe pain and injury. It is unnecessary to enumerate the causes; they are well known.

The usual remedies, as advised by authors, are, perfect rest, warm fomentations, the best of which is hot vinegar applied over brown paper, or

cold lotions. If the inflammation run high, or a large joint is affected, leeching or bleeding, and the general antiphlogistic course, must be resorted to. When thickening of the parts, or extravasation, follows, the indication is to produce absorption by friction with stimulating liniments, moderate exercise, and bandages ; if the symptoms persist, blisters and other usual remedies for chronic inflammation of the joints must be adopted.

But the remedy which I have exclusively relied upon, with entire and immediate success, for the last five or six years, is counter-irritation with the dry cups to the origin of the nerves which supply the affected parts. For example, if it is an articulation of the superior extremity, I apply a succession of dry cups over the spine, between the shoulders, and over the brachial plexus, above the clavicle of the injured side ; if in the vertebrae, over the spine in its vicinity ; and if in the lower extremity, over the spine of the sacrum, lumbar vertebrae and dorsum of the ileum, extending from the sacrum to the anterior spine of the ileum. I do not pretend to assert that this remedy will have the same immediate curative effect in cases complicated with great lesions of the parts, but doubt not that it will excel all other agents in easing the suffering ; indeed, I have met with no cases that have not yielded immediately, since its discovery, except chronic and of long standing (which require time and a repetition of the cups). To illustrate the facts, I will give a few cases of many which I have treated.

CASE I.—In May, 1837, I was riding on horseback in the vicinity of the city, about 12 o'clock, A. M., when my horse fell down and caught my left foot and ankle under the saddle, which caused considerable pain for a short time, but subsided so as to enable me to continue my visits, both before and after dinner, without much suffering, until night, when the pain and swelling increased very rapidly ; the pain becoming most excruciating, I retired to bed early, and had all the usual remedies applied, to the extent of causing the destruction of the epidermis of the foot and ankle. They were kept up until 12 o'clock without the least abatement of the pain or swelling ; indeed, they increased constantly. Despairing of any ease for the night, I discontinued them ; but on seeking for some other remedy, I recollect what great relief I had received and afforded in pains of different parts of the body by dry cupping, and determined to try it, with the hope only that it might deaden the nerves so as to give some temporary ease. I made my boy apply them strongly as near the roots as possible of all the nerves of that extremity on the points above specified. I suppose thirty minutes were required for their application, and before finishing all pain had ceased ; I immediately went to sleep, and did not awake until day-light. Though perfectly free from pain I was afraid to move my foot, so little confidence had I in the remedy, and even after moving it without any return of pain, I remained in my rooms without exposing it to exercise during the day and following night. On the second morning I resumed my usual occupations without the least pain or inconvenience, nor has there been the least evidence of injury since.

CASE II.—Mr. M., ætat. 37, of bilio-lymphatic temperament, and in good health, fell from a scaffold twelve or fifteen feet high, across a scantling, which came in contact with the inferior part of his right dorsal region. He lay apparently lifeless for some time, and after being somewhat revived by stimulants, he was brought to my office (a few doors off) on the 25th of June, 1838. He was pale, nauseated, and greatly prostrated; could not be placed in a sitting position without producing syncope; little re-action; pulse feeble and frequent, 118 in a minute. After placing him on a sofa, I found on the right side of the lower dorsal and upper lumbar vertebra, a black bruise about seven by twelve inches in extent, with ecchymosis and considerable tumefaction, pain excruciating and greatly increased on motion or by pressure, nausea and vomiting. Four large cups were applied on the spine of the afflicted region, which was afterwards bathed with strong spirits of camphor for a few minutes, when he arose and walked several squares along the streets with me, declaring he scarcely felt the effects of the injury; resumed his labor next day without pain, and has not suffered from it since, now more than five years.

CASE III.—Mr. W., ætat. 25, sanguine temperament, health perfect, was thrown from his horse in the afternoon of September 9, 1840, and strained his left wrist. He stated the pain was not severe until night, when it became "insupportable, and continued to increase" up to 10 o'clock next morning, at which time I saw him. He had considerable fever, severe pain, great swelling about the wrist, much thirst, and some headache. I ordered dry cups to be applied on the spine, as before stated. He refused to permit it, saying, "if I did not do something that would help him, he would die." I assured him I was not jesting, and that they would cure him in thirty minutes: he reluctantly submitted, and in less than that time he was cured. I could cite chronic cases of long standing, but deem it unnecessary; the relief is as perfect, only requiring repetition of the remedy and time.

It may not be amiss to state that the cups I use are much larger and stronger than any found with the apothecaries. I have them made of brass, with large broad rims, to prevent pain or cutting of the skin when applied; the inner portion of the rim should project internally, so as to retain the skin within the cups, by which their power will not be diminished while acting. In all cases the cups must be applied with sufficient power to make a decided impression immediately, which is known by the elevation, or tumefaction, and ecchymosis of the skin which are included within the cups. If the cups leave but little impression, and that whitish, without much elevation and change of color of the skin, they either have not been applied sufficiently tight or there is great disease or torpor of the parts. If they produce much tumefaction, it is a good indication of relief. They should be applied and kept on for some minutes, according to the effect and pain they produce. There is a certain point to which they should be carried to fill the proper indications—neither too weak nor too strong: practice can only enable the operator to ascertain that point.—*St. Louis Med. and Surg. Jour.*

MEDICAL REPORT OF THE WESTERN LYING-IN HOSPITAL, DUBLIN.

THE following report of the Hospital embraces a period of two years, that is, from January 1, 1841, to December 31, 1842, inclusive ; and, according to the general register of admissions and applications, relief has been afforded to 1506 women, but, owing to the irregularity with which many cases were entered in the statistical register, it has been found necessary to exclude a considerable number, in order that no facts might be adduced of the accuracy of which we are not certain. Our records will consequently be limited to the delivery of 1206 women ; from these must be deducted 43 cases of abortion, leaving 1163 cases of labor at the full time.

The number of children amounted to 1175 (691 males, and 484 females), of which 63 (44 males, and 19 females) were stillborn, or died at birth ; of these, 12 were premature, 15 stillborn, 2 putrid, 4 footling cases, 8 breech presentations, 1 head and hand presentation, 3 arm presentations, 3 funis presentations, 6 crotchet cases, 2 forceps cases, 1 placenta prævia, 4 syphilitic.

The ages of 1067 patients were ascertained as accurately as possible :

				29 years of age.
17	were at or under	-	-	
296	between	20	and 25	do.
370	"	25	30	do.
177	"	30	35	do.
117	"	35	40	do.
40	"	40	45	do.

In 982 cases the entire duration of labor was as follows :

				6 hours.
In 357 it was under	-	-	-	
312	between	6	and 12	
214	"	12	24	
50	"	24	36	
17	"	36	48	
11	"	48	60	
15	"	60	95	
2	"		100	
3	"		121	
1	"		153	

The extreme prolongation of some of these cases was owing to the friends of the patient deferring their application for assistance.

The period which elapsed between the commencement of labor and the rupture of the membranes, was noted in 981 cases :

				2 hours.
In 167 it was about	-	-	-	
335	between		2 and 6	
165	"	6	10	
113	"	10	14	
71	"	14	18	
33	"	18	22	

In 46	it was between	22 and 26 hours.
23	"	26 and 30
8	"	30 and 38
9	"	38 and 40
4	"	50 and 60
2	"	60 and 70
1	"	70 and 80
3	"	80 and 105
1	"	105 and over

In 812 cases the interval between the rupture of the membranes and the birth of the child was as follows:

In 396 it was about	1 hour.
142	" 2 hours.
120	" 4 do.
50	" 6 do.
34	" 8 do.
17	" 10 do.
26	" 25 do.
11	" 20 do.
9	" 28 do.
4	" 35 do.
1	" 40 do.
1	" 50 do.
1	" 120 do.

In 953 cases, from the birth of the child to the expulsion of the placenta, there elapsed

5 minutes in	98 cases.
10 "	190 do.
15 "	175 do.
20 "	166 do.
25 "	48 do.
30 "	126 do.
35 "	16 do.
40 "	30 do.
50 "	43 do.
60 "	14 do.
From 1 to 2 hours in	- 33 do.
" 2 to 3 "	- 9 do.
" 3 to 4 "	- 5 do.

The latter cases, when the placenta was retained so long, were under the care of midwives, who applied for assistance on this account.

In 1008 cases the presentation was as follows:—

In 941 the head presented; in 13 the hand descended with the head; in 22 the breech presented, 8 dead; in 18 the feet presented, 4 dead; the funis prolapsed in 3; in 6 the funis presented, 4 dead; in 5 the arm presented, 3 dead, 2 of them putrid; in 2 the placenta presented, 1 dead.

There were 13 cases of twins. In 4 cases the children presented naturally—6 children were saved, and 2, which were premature, died. In 6 cases one child presented the breech and the other the head—10 were born alive, two were lost. In one case 1 child presented footling and the other the head—both were saved. In another, one child presented the head and the funis, and the other the foot and funis—both were lost. In a third case both the children presented the feet and funis, and were lost.

In 10 cases there was hemorrhage between the birth of the child and the expulsion of the placenta; in 6 of which manual extraction was necessary, but no unfavorable results followed.

In 6 cases flooding occurred before delivery—3 were cases of accidental, and 3 of unavoidable hemorrhage. The rupture of the membranes was sufficient in the accidental and in one of the unavoidable cases, and the mothers and the children recovered. It was necessary to turn and deliver the child in the other two cases—one of the mothers died and one recovered; one of the children was saved.

Seven patients were attacked by convulsions—all recovered. One fatal case of uterine phlebitis occurred, and several slight attacks of hysteritis, which were relieved by the usual treatment.

We met with one fatal case of rupture of the uterus.

Version was performed 6 times (1 in 243); 5 times on account of presentation of the arm—all the mothers recovered, and 3 children were saved, the others were putrid; and once because of unavoidable hemorrhage.

The forceps were used in 8 cases (1 in 182). Seven of the mothers recovered, and the death of the remaining one was caused by disease of the heart.

In 8 cases the perforator was employed (1 in 182). Six of the mothers recovered, and 2 died—one from rupture of the uterus, as recorded above, and one from disease of the liver.

Of the 1463 women attended during these two years, only 5 died, or 1 in 292. One sunk from disease of the liver, another from disease of the heart, a third after unavoidable hemorrhage, a fourth from uterine phlebitis, and the fifth from ruptured uterus.—*Dr. Fleetwood Churchill, in Dublin Journal of Medical Science.*

METASTASIS—SYMPATHY.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The doctrine of sympathy derives its principal support from the diseased and healthy phenomena manifested through the medium of the nervous system. In the minds of most medical writers, the office of the nervous system appears to be exceedingly vague and indefinite. There is scarcely a diseased or healthy action in the human system, which has not been, by one writer or another, attributed entirely to the agency of the brain and its branches. And yet there does not appear to be that ab-

struseness in the office of this system, which the confusion in the ideas of writers upon this subject might lead us to suppose.

The nervous system is the seat of feeling, or of pain and pleasure; and feeling may be divided into perception, sensation and thought. Feeling is either pleasant or painful, and extends through the whole nervous system. The passion of love is a pleasant feeling, and extends itself through the whole system. The passion of fear is a painful feeling, and equally affects the whole system. The thought of a beautiful person is pleasant; the thought or idea of a monster is painful, and equally affects the whole system with the passions and emotions. All the passions, emotions, sensations and perceptions, are only so many different names for feeling; and they are all either pleasant or painful, and the pain or pleasure extends through the whole system. The heart, the lungs, the digestive and the secretory organs, are all simultaneously affected by the pain or pleasure arising from affections of the nervous system.

In the nervous system there is either a feeling of ease or disease in every part. The prick of a pin is felt through the whole system, and like the passion of fear creates momentarily a *disease* through the whole body. Pain, in every form, whether it arises from inflammations, excitation of the senses, or from the ideas, passions and appetites, produces a general effect on the body. The sensation of pleasure is equally general in its nature and effect. I infer, then, that *the visible office of the nervous system consists in the production and extension or diffusion of feeling.*

I give this definition of the office of the nervous system merely to assist in unravelling some of the mysteries of sympathy and metastasis.

The organs of generation are supposed to hold a special communion or a particular sympathy with the brain, the seat of the imagination. The passion of love, whether excited by the real or the ideal presence of an agreeable object, extends itself through the whole nervous system, and consequently to the organs of generation. The heart, at the same time, manifests its participation in the influence of this passion, by an expansion of its volume and an acceleration of its action; the muscles simply by a greater relaxation; the stomach by a temporary loss of appetite; the skin by a glow of heat and color; and the organs of generation by an erection of the glans penis, and, perhaps, a consummation of the passion. Is there, then, any special communion between the brain and the organs of generation? Can these organs be reached by an influence of the brain, and the rest of the system remain intact? Such, I know, is the doctrine of sympathy, but to my mind it betrays a most culpable looseness of observation.

The only perceptible manifestation which many diseases and many medicines produce in the nervous system, consists simply in a *feeling* of weakness or strength, while other organs and glands will show either a great increase or decrease of activity; each part will manifest its participation in the general effect in strict conformity with its organization. The effect of a passion, a disease, or a medicine, on a muscle, may be simply a relaxation of its fibres, while on the organs of generation a tur-

gescence of all its vessels may arise from the same cause. What only relaxes the skin or a muscle, may cause the stomach to vomit, or the kidneys to secrete a profuse quantity of urine.

In nursing women, when the breasts are very full, as soon as the child commences sucking one breast, a stream of milk will often issue spontaneously from the other. This might be adduced as a remarkable proof of the existence of sympathy, or metastasis. But in the act of nursing a child, there is a general diffusion of pleasure through the system, which relaxes every muscle and every duct, and, in common with the rest, the lactiferous duct, which allows of an emission of the milk. It is probable, also, that the general feeling of pleasure arising from nursing, may somewhat increase the secretion of milk in common with the other glands. I shall give only one more instance of the proof of the doctrine of sympathy.

In the alvine evacuation, a desire to urinate commonly succeeds the effort. This seems to be not only a remarkable but an irrefutable proof of sympathy. But the alvine evacuation is not without a general sensation or feeling; tears will often flow as well as urine, especially in children: besides, a sudden chill or diminution of heat commonly attends the result, and a sudden chill will always be sufficient to quicken the secretion of urine. But I think the chief cause of the desire to urinate arises from the pressure of the abdominal muscles upon the fundus of the bladder. The muscles, in a motion of the bowels, always press even harder upon the bladder than upon the intestines themselves. A pressure of these muscles will at any time create a desire to urinate. The action of the supposed sympathy between these parts is not reciprocal. The act of urinating does not create a corresponding desire of an intestinal evacuation, although the pressure of the abdominal muscles will necessarily, sometimes, produce the semblance of such a desire.

Metastasis, or the fancied change of diseases from one part of the system to another, is considered a result of the principle of sympathy. A remarkable instance of metastasis is supposed to occur in that painful disease, the gout. This disease is supposed, sometimes, to originate in the stomach, liver or intestinal canal, and to pass from these parts into the foot, and especially into the ball of the foot or the first joint of the great toe. Not the least evidence in the world has ever been given of any special anatomical or physical media between these dissimilar and distant parts, but such a translation is nevertheless the fancy of most or all medical writers. In nine hundred and ninety-nine ordinary inflammations of the stomach, liver and bowels, in the forms of gastritis, hepatitis, cholera morbus, dysentery, &c., not a solitary pain, or twinge, or special effect of any kind, ever reaches the foot or the first joint of the great toe; but in the single instance of the gout the most awful disturbance takes place in that part, from a special, connatural intimacy which these parts have been supposed to enjoy! The feet, on the other hand, are often affected with a variety of diseases without ever betraying the slightest degree of proof of a special communion with the stomach, liver and bowels.

The simple history of an attack of gout, seems to be this:—The ball of the foot, and especially the first joint of the great toe, in raising and projecting the superincumbent body, in walking, running, and in all kinds of work performed on the feet, are subject to a much greater labor or exhaustion in proportion to their size than any other of the joints in the body. They are also subject to a greater amount of excitation from heat, cold, moisture, compression from shoes, &c. This condition of these joints, prepares them, on the accession of any of the occasional causes of this disease, to take on the inflammatory action. When the inflammatory action has commenced, a general fever ensues, not from sympathy, but from a participation in the original inflammation by all parts of the body, an extension of the inflammatory action, in which the stomach, liver and bowels are consequently, though not especially, involved. I conceive that either the stomach, bowels or liver may be subject to a similar inflammatory action with the foot, and be in a diathesis to take on such a disease before or after the disease has commenced in the foot, and still furnish no proof of a translation or metastasis of that identical disease from the foot to the abdominal viscera, or from the viscera to the foot. The same exciting causes are as likely to produce the same disease in a new part as in the first part affected; and these causes may continue for a longer or a shorter time. An inflammation often commences in the membrane of the nose, and successively attacks the throat, tonsils, larynx, bronchia and lungs, and will take many months in the progress of the inflammation, without our ever suspecting the operation of such a principle as sympathy. Aside from conjecture, we should naturally infer that the same exciting causes which produced a disease in one part, might also produce it in a new part which happened to be in a similar diathesis, and so on in another new part, until the causes, or the diathesis, had ceased to exist. Merely because an inflammation has ceased to exist in the foot, furnishes no proof that the causes of it have ceased to exist, and that other parts must be affected by the principle of sympathy. In rheumatism, one joint will sometimes be attacked after another, until almost every joint in the body has suffered from the disease. Now if this is really produced by the principle of sympathy, I do not see how the disease could ever end but in death; for the last joint affected must still continue to sympathize with the one just recovered, which would send the disease round and round until death had put an end to the scene.

Another remarkable instance of metastasis, is supposed to take place in the bowel complaint of children, in the supposed translation of the disease to the brain, thereby producing dropsy of the brain. But the fact, in this case, is, there is no removal of the disease, the stomach and bowels remaining just as much diseased as before the effusion in the brain; the brain merely shows its participation in the disease in common with the whole body.

An inflammation of one eye is sometimes followed by an inflammation of the other eye, and is supposed to be a metastasis of the original disease, as if diseases were living, creeping things! If a person could see

as well with one eye entirely closed as with the other which is open, I might suppose the image on the retina of the closed eye to be produced by sympathy, or any other cause I could guess at; but as an image on the retina can only be produced by the rays of light, so I conclude the same causes which produce an inflammation in one of the eyes, must always exist in order to produce a similar inflammation in the other, and so of all the other organs and parts of the body.

D. B. SLACK.

Providence, Sept. 10th, 1843.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON. OCTOBER 4. 1843.

*The Hospitals and Surgeons of Paris.**—It is a misfortune not to have known more of the author of this agreeable book. During a residence of several years in France, he industriously collected a mass of notes, with a view to their publication in the United States. He has succeeded admirably in making a volume that will be read with deep interest by persons both within and without the pale of the profession. As it is a complete index to all the medical and surgical institutions of Paris, it may be consulted with much profit by those who propose to visit that city. Accounts of hospitals, schools and societies, embracing the minutest particulars, are written out with such order and exactness, that it seems as though there could be nothing more to be said of them worthy of observation. After exhausting these topics, which are the essential ones for the class of readers for whom the work was especially prepared, there follows a list of all the medical and scientific Journals, and the expenses and modes of living in Paris, at the hotels, lodging houses, boarding houses, restaurants, cafés, table d'hôtes, &c. Then comes a catalogue of medical booksellers, surgical instrument makers, and lastly, in this department of the publication, a description of the public conveyances, from fiacres, citadines, and cabriolets, to a vulgar omnibus, with the prices of each by the hour. To make this travelling guide the most unexceptionable foreign medical directory extant, Dr. Stewart has added a bibliographical index. "As it is a difficult matter," he remarks, "for persons who are not perfectly familiar with the French medical literature of the day, to know which are the most approved and recent publications on the various subjects of medicine and surgery, I have thought that an index to the best standard works of the French authors, would be acceptable to those who may be desirous of procuring foreign books." So it will prove—a convenience not to be lightly estimated. In this particular alone, Dr. Stewart has been serviceable to those who have a disposition, but not always the means, of ascertaining the titles of books of the highest character abroad.

* *The Hospitals and Surgeons of Paris. A historical and statistical account of the civil hospitals of Paris, with miscellaneous information and biographical notices of some of the most eminent of the living Parisian Surgeons.* By F. Campbell Stewart, M.D. New York: J. & H. G. Langley. Philadelphia: Carey & Hart. 1843. 8vo. p. 432.

This is but a meagre description of the contents of one half of the book, Part First. Part the Second is wholly confined to a synopsis of the lives of Paris surgeons—men whose names are familiar to our ears in consequence of their distinguished attainments. There is something fascinating in the biography of any individual who stands out before mankind with a little more prominence than ordinary flesh and blood. There is an inherent love in us for the marvellous—for which there is abundant food in the eventful life of one who has raised himself from obscurity to honorable renown. Dr. Stewart furnishes us with a personal history of twenty-one French surgeons of extensive celebrity—every one of whom has passed through trials of extraordinary severity. They have, with few exceptions, surmounted difficulties of prodigious magnitude, and by the strength of their own great powers, raised themselves from nothing to be stars of the first magnitude in the firmament of modern science. They are Amussat, Baudens, Bérard, Breschet, Civiale, Cloquet, Dubois, Gerdy, Guérin, Jobert, Larry, Langier, Leroy, Lisfranc, Malgaigne, Marjolin, Ricord, Roux, Ségalas, Velpeau and Orfila.

Without claiming any thing on the score of originality in thought, Dr. Stewart is entitled to the praise of having collected a large amount of that very kind of matter about which every one is solicitous to know something. We know of no substitute for it, and on that account, aside from all other considerations, recommend to our friends to call on Messrs. Ticknor & Co. for a copy.

Dr. Carr's Introductory Lecture.—When the lecture term opened at Castleton, a week or two since, Dr. Carr, the Professor of Chemistry and Natural History, gave an introductory discourse. A large committee of the class requested that it might be printed, which being consented to, has given us the opportunity of a perusal. It abounds in variety—there being both poetry and prose in admirable proportions. There is a short dissertation on matter, accompanied by this trite comment—"Matter is only known to us by its properties, as manifested to our senses, from which we infer its existence." That astronomer who said that it was possible there was a sun somewhere in the heavens, though he knew nothing more about it than what he saw, felt, and heard people say, reasoned with equal boldness and ingenuity. However, without cavilling unnecessarily at some parts of the discourse, on account of the manner of splitting up words, to adapt them, apparently, to the comprehension of the audience—the lecturer being forgetful, as it were, that he was addressing a polished assembly of young gentlemen who had learned the definition of *ponderable* and *imponderable*, for example, in their academical education—it was well fitted for the occasion. A public teacher of medicine should neither covet the praise of critics nor fear their puny efforts. His business is to impart that kind of knowledge which will best qualify medical students for bettering the condition of the sick, and warding off the infirmities that pertain to human organization. We perceive, in Dr. Carr's discourse, the ardent philosopher, the able chemist, and the man who acts with independence. Wishing him the success and the meed of applause which his talents are destined to command, we leave the pamphlet for the annotations of other editors.

India Journal of the Medical and Physical Sciences.—No. 2 of the second volume of this monthly periodical, bearing a general resemblance to the London Medical Gazette, and published at Calcutta, was received last week. Whether Dr. Corbyn's Journal has been discontinued, or whether this is the same thing with a new name and conductor, has not yet been ascertained. The subscription price is 16 rupees—equal to eight dollars per annum—in advance. J. Eveleigh, Esq. is the editor. The contents of the specimen before us, are of a highly respectable character. An interesting report of a meeting of the Medical Society, is the first article, in which animal magnetism is permitted to peep out, through the instrumentality of Dr. Monat, who appears to be fugle master, under the cognizance of Dr. Elliotson, of London.

There are no papers of sufficient general interest for re-publication; but no opportunity will be omitted to select from subsequent numbers whatever may be new, strange or important.

Uncourteous Plea for Homœopathy.—A manuscript of 15 letter pages, addressed to the editor, in reply to a correspondent's review of Curtis & Lillie's Epitome, &c., has been returned to the author, in the way pointed out in case it should not have an insertion in the Journal. We should have been very unwilling to believe that any advocate for homœopathy could have been found, on this side of the Atlantic, so wanting in courtesy as this rejected paper shows the writer to be. There is no apology for ill-breeding, however much ignorance may be winked at in certain cases. There is a vast difference between reasoning and personal invective. The one engenders respect, in an honest inquirer after truth; but the other is a mill-stone on the neck of the man who uses it, whose ambition often is to rise at all hazards, and who cries out, as he drives fearlessly over the course, *out of my way, if you would save your bones!*

A note accompanied this extraordinary communication, which states that the writer "was induced to take the trouble of preparing the enclosed letter, from an assurance he received from Dr. V. that Dr. Smith had expressed his readiness to insert a reply to the review." Our prejudices against individuals who disgrace their profession, will never prevent us from publishing well written papers of reasonable length, in vindication of homœopathy. Because we cannot comprehend its doctrines, nor discover the same results that others do in the infinitesimal doses of medicine, the friends of that school may be assured that we do not therefore question the honesty or the scientific attainments of many of its advocates. If there is light to be had, let us have it. It is our desire to collect useful knowledge from all sources, and to disseminate it again for the benefit of those who are conscientious in relieving the physical woes of humanity.

Willoughby University.—An extra of the Painesville Telegraph announces the fact, that some sort of a misunderstanding has existed between several gentlemen of the faculty in the medical department of Willoughby University, and the Trustees. Three of the faculty have emigrated to Cleveland, organized a new medical school, and published a scheme of its future intentions and prospects. Not at all discouraged, though grievously disappointed at the sudden turn in their affairs, as represented

in the manifesto which elicited these observations, the trustees have re-filled the vacated chairs of Anatomy, Chemistry and Obstetrics, without accepting the resignations of the late incumbents. Dr. Trowbridge, the veteran surgeon, long identified with the prosperity of the Willoughby school, remains at his post, like a tried soldier. James Quackinboss, M.D., is now professor of General and Special Anatomy and Physiology; Robert H. Paddock, M.D., professor of Chemistry, Pharmacy and Materia Medica. John Butterfield, M.D., assumes Theory and Practice of Physic and Physical Signs of Disease; and Hosmer Graham, M.D., is professor of Obstetrics and the Diseases of Women and Children. These constitute the new faculty.

Ohio is likely to be supplied with all the appliances for increasing the medical strength of the Union, numerically, and, it is fervently hoped, scientifically.

Chemical Analysis of American Forest Trees.—D. J. Browne, Esq., extensively known in this and other countries for his indefatigable efforts to develope the resources of the forests of America, is about publishing a national work, entitled *The Trees of America*, embracing a complete description of them; their culture, management, uses, propagation, economy in the arts, &c. He doubts not that many important medicines, now purchased at great cost abroad, might be found at our own doors, were a proper chemical analysis instituted, as it should be, under the patronage of some of the state legislatures or the general government. Iodine exists in the mangrove, and is it not possible that it abounds in numbers of the forest trees? Even quinine is already extracted from some of the native shrubs, and the time may yet come when it may be collected in great abundance, as may many other valuable medicines, from the most common, but now unsuspected sources.

Mr. Browne has both the talent and the industry to accomplish this desirable undertaking, in which he should be liberally sustained by the public. His *Sylva Americana* is now out of print—and Michaux does not embrace half the ligneous flora of this vast country. As medical conservators, aside from other and important scientific considerations, we hope Mr. Browne will live to accomplish the great design on which he is so ardently engaged.

Medical Colleges in Ohio.—A correspondent wishes a mistake corrected in regard to an observation made in the Journal some weeks ago, in which it was said that Cincinnati had but one medical college. He thinks it unjust to allow the impression to go abroad, that the *Literary and Botanical College of Ohio* is dead, having once known that it existed. He says that it was incorporated by the legislature of Ohio on the 6th of March, 1839, and located at Columbus, where the school was in operation four years, and had received more than a hundred students. Although in a flourishing condition, in 1841 it was removed, by another legislative act, to Cincinnati, where it has been well sustained to the present time. Its location is in the large edifice erected by the celebrated Madam Trottope, on Third Street, east of Broadway. The lectures commence the first Monday in November, and continue to the last of February. The facilities for acquiring a knowledge of anatomy and physiology, botany, &c.,

in this institution, are represented not to be surpassed by any other in the west.

Index to the American Journal of the Medical Sciences.—Ephraim Buck, Jr., M.D., of Boston, has made a complete index of this work, from the very beginning to the last No. In accomplishing it a great amount of labor and untiring patience have been required—there being twenty-six volumes, made up of items which few individuals would have arranged in a manner so perfect. Were the publishers of the Journal to purchase the manuscript, even were it never published, we think it would soon be prized, in the light of a convenience not to be parted with for three times what it might cost.

New Orleans Hospital Reports.—A correspondent of the New Orleans Tropic asks, very properly, who furnishes the reports of the Charity Hospital—the number of admissions and the character of the disease? He says that he has been a daily visiter of the institution for some time, and is convinced that not one fourth of the cases reported to be yellow fever, are so. It seems that the house physician has little or no hand in the business of christening the disease of which a patient is sick, but it gets a name through a newspaper reporter.

That the yellow fever exists there is not questioned; but that the accounts are prodigiously exaggerated, is quite probable. Some people delight in propagating horrible news—it exhilarates them just in proportion to the violence of the panic on the public mind.

Disposition of Naval Surgeons.—Dr. Samuel C. Lawson, Surgeon, and Dr. Chas. Bishop, Assistant Surgeon, are at Rio Janeiro, on board the U. S. Sloop St. Louis. Dr. J. M. Foltz, ordered to the Ship Boston, at Boston. Dr. W. Whelan, Fleet Surgeon of the Mediterranean squadron. Dr. William G. Wilson, an Assistant Surgeon, has resigned his commission.

Surgeons in the Navy.—“Some of the most interesting works that we have ever read,” says the American Sentinel, “have been from the pens of Surgeons and Assistant Surgeons of France, Great Britain and this country. The account that we have read in relation to the *post-mortem* examination of Bonaparte was from the pen of a British surgeon. If we wish to learn anything new in relation to the botany, the climate, the animals, the diseases, the volcanoes, or the geology of the world, we will have to look into the journals of the naval surgeons of civilized countries. Besides being specially familiar with every branch of science, the surgeons generally understand foreign languages. Their learning introduces them into the high medical circles of the nations they visit, and their excellent scholarship qualifies them eminently for describing all that they see in distant parts of the globe. It is an egregious error to send a public vessel abroad without a physician. Besides attending the sick, which the humanity of the nation should always see properly executed, the surgeon allows nothing that is worthy of being communicated to the world to pass by without notice.”

Oleum Jecoris in Phthisis.—The common cod-liver oil—*oleum jecoris gadi morrhi*—has been employed by Professor Troussseau lately in four cases of phthisis in an advanced stage. The patients were all of the female sex: one 48 years old, one 35, the other two from 20 to 22. In three, the amelioration was immediate; the fourth, after becoming worse for some time, grew at last gradually better. The oil was generally administered mixed with syrup; it may also be given in an electuary, in a bolus, in a gelatinous capsule, or in pills, after being solidified. The dose is from 3 iss to 3 ss. Nausea and vomiting sometimes took place; at other times, the only disagreeable sensation was from the eructations retaining the taste and odor of the oil; rarely diarrhoea; no effect on the circulation and respiration.

Fees of a London Coroner.—The editor of the Lancet, Mr. Wakley, during the last year, held 839 inquests, for which he got for himself in fees, £1,118 13s. 4d., the mileage, £128 11s. 9d. The sums paid for others attending his inquests were only £895 5s. Mr. Baker held 868 inquests—£1,157 6s. 8d. for himself, and to others, in expenses, allowed £1,393 14s. 6d. The proportions of the expenses of the other coroners (Gell and Higgs) are similar to Mr. Baker's. Notwithstanding Mr. Wakley's long indisposition, and his parliamentary duties, he has held, within 29, as many inquests as Mr. Baker.

Medical Miscellany.—Smallpox exists at Newburyport, Mass. It begins to show itself in several places, and will doubtless become pretty common in the course of the winter, unless vaccination is seasonably resorted to.—An able address by C. A. Harris, M.D., delivered before the American Society of Dental Surgeons, at the opening of the fourth meeting at Baltimore, July 18th, has been published in a pamphlet. It is characterized by good sense, literary taste, and a strong disposition to elevate dentistry to the rank and consideration it deserves.—One hundred and twenty-eight students, of whom thirty-eight received degrees, attended lectures at the Medical College of Georgia, the last session.—To make leeches bite, says a German Journal, place them in a saucer of fresh beer till they become lively, and then apply them quickly to the part.

To CORRESPONDENTS.—A dissertation on asthma, and a memoir of the late Dr. Luke Howe, have been received.

MARRIED.—At Windsor, Me., Dr. R. M. Chase to Miss Ann E. Pope.

DIED.—In London, Lowndes square, Sir Thomas Charles Morgan, M.D.

Number of deaths in Boston, for the week ending Sept. 30, 54.—Males, 34—Females, 20.

Of consumption, 9—scald, 1—cholera infantum, 5—typhus fever, 4—induenza, 1—infantile, 2—bowel complaint, 1—diarrhea, 1—teething, 1—dropsy, 3—hooping cough, 2—pleurisy fever, 1—croup, 1—dysentery, 2—scrofula, 1—tumor, 1—marasmus, 1—fits, 2—suicide, 1—old age, 1—acclental, 1—debility, 1—dropsy in the head, 1—dropsy on the brain, 1—child-bed, 2—liver complaint, 1—apoplexy, 1—syphilis, 1.

Under 5 years, 23—between 5 and 20 years, 4—between 20 and 60 years, 25—over 60 years, 2 (one of these being 101 years and 8 months).

Continental Treatment of Neuralgia.—Dr. Schleiser, of Peitz, has prescribed, with success, to patients with abdominal neuralgia, but whose circumstances would not permit of their visiting a watering-place, the use of an artificial mineral water, resembling that of Eger, in Bohemia, and made as follows:—R. *Filtered spring-water*, a pint; *diluted sulphuric acid*, two drachms and a half; *hydrochloric acid*, twenty drops. Mix, and add *bicarbonate of soda*, forty-five grains. The bottles are then to be sealed up without delay, and kept cool; one or two pints may be drunk daily. In hepatic neuralgia, Dr. Schleiser depends much on the effects of belladonna; in cases where great irritability of the stomach is present, he finds nitrate of silver suitable, combined with morphia.—*Rust's Magazin.*

Morphia has been an ordinary remedy for neuralgia, the cure of which it may, in certain cases, effect; but a French practitioner, M. Rougier, has advised the adoption of an ingenious method, which he says will prove the completeness and permanence of the cure. After the apparent removal of the disease by the morphia, he administers successive small doses of strychnia, gradually increasing the amount of the doses and abridging the intervals between them. Now, if the cure have been complete, the tremors and other characteristic effects of the strychnia go on diminishing in intensity from the first, notwithstanding the increasing strength and frequency of the doses; but if otherwise, a contrary result happens, and the effects of the strychnia increase in intensity.—*L'Experience.*

Alum for Lead-colic.—Weiglein, a German practitioner, had a patient, twenty-two years of age, who, having been often attacked with lead-colic, applied to him for advice while suffering under a fresh attack, with incessant pains and retraction in the umbilical region, the anus, and testicles, and constipation, dry skin, and quick hard pulse. Oil, opium, and emollient fomentations, employed for several days, produced no alleviation, when half a grain of alum was given every three hours. After the first dose, which is said to have caused abundant stools, the abdominal pains ceased, and the cure was complete in three days. Another patient, of the same age, derived equally little benefit from the palliative treatment, and similar results from the use of alum. This remedy acts in lead-colic by its chemical effect. It decomposes the other salts of lead in the alimentary canal by a portion of its sulphuric acid uniting with the latter to form sulphate of lead, while it is partly converted into sulphate of potass, which acts as a purgative. Large doses of alum would be injurious, but we must say that the doses above stated seem insignificantly small.—*Lon. Lancet.*

New Preservative for Animal Substances.—A French physician has addressed a paper to the Academy of Sciences on the power of a *syrup of iron* to preserve animal substances unchanged. This syrup is a combination of sugar and iron which does not decompose, crystallize, or ferment, at any temperature. Meats kept in this syrup diminish very little in weight, resist the most active putrefactive agency, and on being washed in cold water resume their original volume and appearance as from animals newly killed.—*Ib.*